RI SOS Filing Number: 201752591730 Date: 10/30/2017 4:00:00 PM

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: 2017 Limited Liability Company	ង ស្គ្រា
→ Filing period: September 1 - November 1 → Filing Fee: \$50.00	

1. Entity ID Number	2. Exact name of	of the Limited Lia	bility Company				
000 910 415	South Point LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531210	REAL ESTATE SAIRS						
5. State of Formation	1						
RI					•		
6. Principal Office Address			City	State	Zip		
248 Sucudash Ro			So. Kingstaun	RI	02879		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
CHARISHE Cummiskey			Contact Title				
Street Address 348 SuccessAsh Road R Lick ALL managem (names and addresses) of the Limited Liebil			city WAKEFIELD	State	zip 02879		
8. List ALL managers (names a	nd addresses) of	the Limited Liabil	lity Company, IF APPLICABLE - D	O NOT LIST ME	MBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
Signature of Authorized Person			sken	10/-	25/17		
Signature of Authorized Person							
Challite Cumminan HERE							
		V	FIL	tu a	,		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 3 0 2017

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